

**PRINTER RUSH**  
(PTO ASSISTANCE)

*HC Corresp.*

Application : <u>10/767433</u>	Examiner : <u>ELLIS</u>	GAU : <u>2188</u>
From: <u>OLA/Ⓟ</u>	Location: IDC <u>(FMF)</u> FDC	Date: <u>2/22/06</u>

Tracking #: \_\_\_\_\_ Week Date: \_\_\_\_\_

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
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[RUSH] MESSAGE: please reapply issue fee to the most recent NOA.

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## PART B - ISSUE FEE (S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Now, do not mark-up with any corrections or use Block 1)

REED SMITH LLP  
SUITE 1400  
3110 FAIRVIEW PARK DRIVE  
FALLS CHURCH, VA 22042

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## Certificate of Mailing

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1/13/2006 HBEYEN2 00000194 081480 10767433

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APPLICATION NO		FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10767,433		1/30/2004	Kenji Mori	HITA.0507	7249

TITLE OF INVENTION: STORAGE DEVICE CONTROL UNIT AND METHOD OF CONTROLLING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$0	\$0	\$0	3/7/2006

EXAMINER	ART UNIT	CLASS - SUBCLASS
ELLIS, KEVIN L.	2188	711-113000

1. Change of correspondence address or indication of Office Address\* (37 CFR §1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (have as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Reed Smith LLP2. Stanley P. Fisher, Esq.3. Juan Carlos A. Marquez, Esq.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY &amp; STATE OR COUNTRY)

HITACHI, LTD.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Tokyo, Japan

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ Individual☒ Corporation or private group entity☐ government

4a. The following fees are enclosed:

☒ Issue fee☒ Publication Fee☒ Advance Order - # of Copies: 3

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☒ Apply Issue and Publication fees previously paid on April 6, 2005.☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1480 (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) to the application identified above.

(Authorized Signature)

(Date) JANUARY 12, 2006

Stanley P. Fisher Reg. No. 24,344

Juan C.A. Marquez Reg. No. 34,023

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Page 2 of 3

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